

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
pm 1-28
JAN 29 PM 2:28

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

IMPORTANT: Indicate by # type of committee you are reporting for: 22

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Walt T. Rogers

Political Party (if applicable)

Republican

Office Sought

State Senate

District (if Senate or House)

10

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE

REPORT

For Office Use Only

Comm. #

1751

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Computer

WRS WRG

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Beverly A. Hecker
SIGNATURE OF PERSON FILING REPORT

317-234-4585
TELEPHONE

5-28-08
DATE SIGNED

I AM FILING A 5-27-08 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # ☒

☒ CHECK IF AMENDMENT TO REPORT DATED 5-27-08

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

5,603.98

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

5,210.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

10,813.98

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2,287.69

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

8,526.29

**UNPAID BILLS (From Schedule D - Attach Schedule D)

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

25.45

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 733.95

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

RESET

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

SCHEDULE

H

(Rev. 02/08)

CAMPAIGN
PROPERTYATTACH SCHEDULE H TO
EACH REPORT, MAKING
CHANGES AS REQUIRED.☐ CHECK THIS BOX IF
AMENDING FORM**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
3-07-08	Dell Multifunction Color Laser Printer 3115 cn	733.95	733.95

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ _____

* If estimated, show est. beside figure.

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTALS \$ _____ \$ _____

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ _____

(Attach Additional Schedules if Needed)

File with:
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Disclosure Board
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Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

0196
IA ETHICS AND
CAMPAIGN DISCLOSURE
pm 5:28
2008 MAY 30 AM 9:32

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

IMPORTANT: Indicate by # type of committee you are reporting for: ☒ 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
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CANDIDATE COMMITTEES ONLY:

Candidate Name

Walt T. Rogers

Political Party (if applicable)

Republican

Office Sought

State Senate

District (if Senate or House)

10

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

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Audited

1751

WRS DV

12-29-08

7 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Beverly A. Hadden
SIGNATURE OF PERSON FILING REPORT

319-234-4985
TELEPHONE

5-28-08
DATE SIGNED

I AM FILING A 5-27-08 ⁵⁻³⁰⁻⁰⁸ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

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(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

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****UNPAID BILLS** (From Schedule D - Attach Schedule D)

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 25.45

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

35

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5-19-08	ID# CK# 3983	Linda Pattee 8205 Beaver Hills Land Cedar Falls, IA 50613		\$100.00	<input type="checkbox"/>
5-19-08	ID# 2344 CK#	Joel K. Rogers 14700 S. Glen Eyrie St. Olathe, KS 66061	Brother	50.00	<input type="checkbox"/>
5-19-08	ID# 2192 CK#	Sarah J. Thomsen 310 South Tennessee Ave. Mason City, IA 50401	Niece	25.00	<input type="checkbox"/>
5-19-08	ID# 2622 CK#	Ralph H. Ridder 3460 Georgetown Dr. Waterloo, IA 50701	Father-in-law	100.00	<input type="checkbox"/>
5-19-08	ID# CK# 3285	Alissa Rosenau 3260 New Towne Rd. Antioch, TN 37013		50.00	<input type="checkbox"/>
5-19-08	ID# 5966 CK#	B. Marie Willett 922 Higby Dr. Cedar Falls, IA 50613		100.00	<input type="checkbox"/>
5-19-08	ID# 8306 CK#	Barbara Gilbertson 1609 Rainbow Dr. Cedar Falls, IA 50613		50.00	<input type="checkbox"/>
5-29-08	ID# 7370 CK#	Karen J. Hensley 2307 Victory Dr. Cedar Falls, IA 50613		50.00	<input type="checkbox"/>
5-19-08	ID# CK# 3601	Emily Wellnitz 520 Greenfield St. NE Cedar Rapids, IA 52402	Niece	150.00	<input type="checkbox"/>
5-19-08	ID# 1625 CK#	Chad Hertz 504 Orchard Drive Cedar Falls, IA 50613		250.00	<input type="checkbox"/>

SUB-TOTAL

\$ 925.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
5-19-08	ID# 7160 CK#	Lorene Wellnitz 2141 Logan Ave. Waterloo, IA 50703		\$100.00	<input type="checkbox"/>
5-19-08	ID# 1082 CK#	Lucille R. Larsen 7703 University Ave. Apt. 108 Cedar Falls, IA 50613		35.00	<input type="checkbox"/>
5-19-08	ID# 7743 CK#	Timothy A. Schreiber 1515 West 5th St. Cedar Falls, IA 50613		100.00	<input type="checkbox"/>
5-19-08	ID# CK# 3707	James Mudd, Sr. 3949 Beaver Ridge Trail Cedar Falls, IA 50613		1,500.00	<input type="checkbox"/>
5-19-08	ID# CK# 10248	Lea Ann Saul 1825 Greenhill Road Cedar Falls, IA 50613		500.00	<input type="checkbox"/>
5-22-08	ID# CK# 2570	Patty King 3611 Eastpark Rd. Cedar Falls, IA 50613		50.00	<input type="checkbox"/>
5-22-08	ID# CK# 5409	Merle Oakland 1811 Primrose Dr. Cedar Falls, IA 50613		25.00	<input type="checkbox"/>
5-22-08	ID# CK# 4268	Phyllis A. Dahlgren 5533 Prestwick Lane Dallas, TX 75252		1,000.00	<input type="checkbox"/>
5-22-08	ID# CK# 9301	Chris Ollendieck 3428 Calumett Dr. Cedar Falls, IA 50613		25.00	<input type="checkbox"/>
5-22-08	ID# CK# 5330	Scott Bennett P.O. Box 817 Mason City, IA 50402	Brother-in-law	250.00	<input type="checkbox"/>

SUB-TOTAL

\$ 3,585.00

TOTAL (if last page of this schedule)

\$

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Page 2 of 4
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
5-22-08	ID# CK# 4465	Carolyn M. Young 3808 Laurinda Dr. Cedar Falls, IA 50613		\$ 50.00	<input type="checkbox"/>
5-22-08	ID# CK# 1246	Timothy W. Thomsen 16533 300th St. Mason City, IA 50401	Nephew	50.00	<input type="checkbox"/>
5-22-08	ID# CK# 4072	Cindy Whitehill 1106 4th St. Grundy Center, IA 50638		50.00	<input type="checkbox"/>
5-22-08	ID# CK#	Unitemized contribution		10.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 160.00

TOTAL (if last page of this schedule)

\$

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Page 3 of 4
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5-25-08	ID# CK# 2916	Abigail Lynch 400 12th Ave. Independence, IA 50644		\$ 40.00	<input type="checkbox"/>
5-26-08	ID# CK# 2689	Joel Bartlett 54282 276th St. Kelley, IA 50134	Nephew	100.00	<input type="checkbox"/>
5-26-08	ID# CK# 2235	Becky Bartlett 2026 Boxwood Dr. Cedar Falls, IA 50613		250.00	<input type="checkbox"/>
5-26-08	ID# CK# 9156	Dennis J. Lenth 308 Clair St. Cedar Falls, IA 50613		50.00	<input type="checkbox"/>
5-26-08	ID# CK# 5851	Laurie L. Morris 711 Oak Park Blvd. Cedar Falls, IA 50613		25.00	<input type="checkbox"/>
5-27-08	ID# CK# 6214	Nathan Beving 3610 Laurinda Dr. Cedar Falls, IA 50613		25.00	<input type="checkbox"/>
5-27-08	ID# CK# 2118	Brad Pierschbacher 3610 Laurinda Dr. Cedar Falls, IA 50613		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 540.00

TOTAL (if last page of this schedule)

\$ 5,210.00

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Page 4 of 4
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-21-08	ID# CK# 1009	Justin Bartlett 1762 Flower St., #8 Waterloo, IA 50701	Reimburse - wireless network router	\$ 53.37
5-21-08	ID# CK# 1010	Matt Reisetter 1925 Main St. Cedar Falls, IA 50613	Reimburse - Materials for Campaign handouts	30.20
5-25-08	ID# CK# 1011	Natalie Brown 604 W. 28th St. Cedar Falls, IA 50618	Reimburse - 22M campaign handouts	2,112.74
5-27-08	ID# CK# 1012	Cedar Falls Utilities P.O. Box 769 Cedar Falls, IA 50613	Campaign Office Utilities - 4-19-08 to 5-1-08	71.29
5-27-08	ID# CK# 1013	Walt Rogers P.O. Box 1142 Cedar Falls, IA 50613	Reimburse - Campaign office supplies	20.09
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2,287.69
TOTAL (if last page of this schedule)				\$ 2,287.69

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Walt Rogers for Iowa

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
--------------------------------------	--------------------------

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5-21-08	Iowa Family Pac 1100 N. Hickory Blvd., Ste. 107 Pleasant Hill, IA 50327		Registered Voter Lists	\$ 25.45	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 25.45	
TOTAL (if last page of this schedule)				\$ 25.45	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)